FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

SEC Mail Processing Section

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

AUG 12 2008 UNIFORM LIMITED OFFERING EXEMPTION Washington, DC

110

OMB APPROVAL						
OMB Number:3235-0076 Expires:August 31, 2008 Estimated average burden hours per form16.00						
SEC USE ONLY						
Prefix	Serial					
Fielix	Serial					
	<u> </u>					
DATE RECEIVED						
[1					

Name of Offering (check if this is an ame	endment and name h	ias changed, and ii	ndicate change.)		
Limited partnership interests of GovPlus Fun	d Al, L.P.				
Filing Under (Check box(es) that apply):	☐ Rule 504	☐ Rule 505	Rule 506	Section 4(6)	ULOE
Type of Filing: New Filing					
	A. BASIC	IDENTIFICAT	ION DATA		
1. Enter the information requested about the is	ssuer	·			
Name of Issuer	ndment and name ha	as changed, and in	dicate change.	08	057972
GovPlus Fund AI, L.P.	_				
Address of Executive Offices		(Number and Stre	et, City, State, Zip Code		mber (Including Area Code)
c/o NorCap Management, L.P., Two Lincoln C	enter, 5420 LBJ Fre	eway, Suite 525,	Dallas TX 75240	(972) 701-881	5
Address of Principal Offices	-	(Number and Stree	et, City, State, Zip Code) Telephone Nur	mber (Including Area Code)
(if different from Executive Offices)					PROCESSED
Brief Description of Business: Private Inves	stment Company			· - · ·	JAUG 1 9 2008
Type of Business Organization					
corporation	limited pa	artnership, already	formed [other (please spe	ocity, HOMSON REUTER
	limited pa	artnership, to be fo	med		
		Month	Year		
Actual or Estimated Date of Incorporation or Organization	anization:	0 9	0 4	4 🔯 Actu	al Estimated
Jurisdiction of Incorporation or Organization: (Er	nter two-letter U.S. Po	ostal Service Abbre	eviation for State;	_	
	CN	for Canada; FN fo	r other foreign jurisdiction	on) D	E

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

<u> </u>									
		A. BASIC II	DENTIFICATION DATA	A					
Each promoter ofEach beneficial orEach executive of									
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner				
Full Name (Last name first	t, if individual):	NorCap Managemen	it, L.P.						
Business or Residence Ac	idress (Number and	d Street, City, State, Zip Coo	de): Two Lincoln Centr	er, 5420 LBJ Free	eway, Suite 525, Dallas TX 75240				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner		☐ Director	☐ Investment Manager				
Full Name (Last name first	i, if individual):	Norcom, David R.							
Business or Residence Ac Suite 525, Dallas TX 7524		d Street, City, State, Zip Coo	de): c/o NorCap Manaç	gement, L.P., Two	Lincoln Center, 5420 LBJ Freeway,				
Check Box(es) that Apply:		☐ Beneficial Owner	☑ Executive Officer	Director	☐ General and/or Managing Partner				
Full Name (Last name first	t, if individual):	Baggett, Carl Y.							
Business or Residence Ac Suite 525, Dallas TX 7524		d Street, City, State, Zip Coo	de): c/o NorCap Manaç	gement, L.P., Two	b Lincoln Center, 5420 LBJ Freeway,				
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner		Director	☐ General and/or Managing Partner				
Full Name (Last name first	t, if individual):	Enhanced premium	Partners, LLC						
Business or Residence Ad Suite 525, Dallas TX 7524	•	d Street, City, State, Zip Coo	de): c/o NorCap Manaç	gement, L.P., Two	D Lincoln Center, 5420 LBJ Freeway,				
Check Box(es) that Apply:	☐ Promoter	⊠ Beneficial Owner		Director	☐ General and/or Managing Partner				
Full Name (Last name first	ા, if individual):	Enhanced premium	Partners 3, LLC						
Business or Residence Ad Suite 525, Dallas TX 7524		d Street, City, State, Zip Coo	de): c/o NorCap Manaç	gement, L.P., Two	Lincoln Center, 5420 LBJ Freeway,				
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full Name (Last name first	t, if individual):								
Business or Residence Ad	idress (Number and	d Street, City, State, Zip Coo	de):						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full Name (Last name first	i, if individual):								
Business or Residence Ad	dress (Number and	d Street, City, State, Zip Coo	de):						
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				
Full Name (Last name first	i, if individual):								
Business or Residence Ad	dress (Number and	d Street, City, State, Zip Coo	:(eb						
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner				

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	B. INFORMATION ABOUT OFFERING												
1. 1	Has the issue	er sold, or	does the is	suer inten	d to sell, to Answer	o non-accr also in Api	edited inve	estors in th lumn 2, if t	is offering	? r ULOE.		☐ Yes	⊠ No
2. 1	What is the m	ninimum in	vestment t	hat will be					-			\$1	,000,000*
													r amount at its discretion
				6 6 .								17 1.√	- DNs
	Does the offe	•			-							Zi tes	s □ No
; ;	Enter the info any commiss offering. If a and/or with a associated po	ion or simi person to state or st	lar remune be listed is ates, list th	eration for an associ ne name of	solicitation iated perso f the broke	of purcha on or agen or or deale	sers in cor t of a brok r. If more t	nnection w er or deale than five (5	ith sales o or registere 5) persons	f securities d with the to be liste	s in the SEC d are		
Full N	lame (Last na	ame first, i	f individual)									
Busin	ess or Resid	ence Addr	ess (Numb	per and Str	reet, City, S	State, Zip	Code)						
Name	of Associate	ed Broker	or Dealer										
	s in Which Pe Check "All S												☐ All States
(A					☐ (CO)					☐ [GA]	□ [HI]	□ [ID]	<u></u>
☐ (IL] 🔲 [IN]	□ [IA]	☐ [KS]	□ [KY]	□ [LA]	☐ [ME]		[MA]	[Mi]	☐ [MN]	☐ [MS]	[MO]	
<u>□</u> (M	T] [NE]	□ [NV]	□ [NH]	□ [NJ]	□ [NM]	□ [NY]	□ [NC]	□ [ND]	□ [OH]	□ [OK]		☐ [PA]	
□ [R	ı] 🔲 [SC]	☐ [SD]	□ (TN)	□[тх]	[[[□ [VA]	[WA]	□ [M∧]	[WI]	□ [WY]	□ [PR]	
Full N	ame (Last na	ame first, i	f individual)	,								
Busin	ess or Resid	ence Addr	ess (Numb	er and Str	reet, City, \$	State, Zip	Code)						
Name	of Associate	ed Broker	or Dealer										
	s in Which Pe Check "All S												☐ Ali States
□ [A	L] [AK]	☐ [AZ]	☐ [AR]	CA]		□ [CT]	□ [DE]	☐ [DC]	□ [FL]	☐ [GA]	☐ [HI]	□ [ID]	
] [IN]	□ [IA]	☐ [KS]	☐ [KY]	□ [LA]	☐ [ME]	☐ [MD]	☐ [MA]	☐ [MI]	☐ [MN]	☐ [MS]	☐ [MO]	
□ {M	T] [NE]	□ [NV]	□ [NH]	[LN]	□ [NM]	[YN]	□ [NC]	□ [ND]	[HO]	□ [OK]	□ [OR]	☐ [PA]	
□ (R] 🔲 [SC]	[SD]		[XT]	[עדן]	□ [VT]	□ [VA]	□ [WA]	[WV]	□ [WI]	[WY]	□ [PR]	
Full N	ame (Last na	ame first, it	individual)									
Busin	ess or Resid	ence Addr	ess (Numb	er and Str	eet, City, \$	State, Zip	Code)						
Name	of Associate	ed Broker o	or Dealer										
	in Which Pe Check "All S					olicit Purch	nasers						☐ All States
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] 🔲 [IN]	□ [IA]	☐ [KS]	☐ [KY]	[LA]	☐ [ME]	☐ [MD]	☐ [MA]	[MI]	☐ [MN]	☐ [MS]	[MO]	
□ [M	T] [NE]	□ [NV]		□ [NJ]	□ [NM]	□ [NY]		□ [ND]	□ [OH]		□ (OR)	☐ [PA]	
□ [R] [sc]	☐ [SD]	□ [TN]	□ (TX)	[UT]		□ (VA)	□ [WA]	[WV]	[WI]	□ (WY)	□ [PR]	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and				
	already exchanged. Type of Security		Aggregate Offering Price	,	Amount Already Sold
	Debt	\$		\$	<u> </u>
	Equity	\$		\$	
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$		\$	
	Partnership Interests	\$	100,000,000	\$	16,201,372
	Other (Specify))	\$		\$	
	Total	\$	100,000,000	\$	16,201,372
	Answer also in Appendix, Column 3, if filing under ULOE				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors		31	<u>\$</u>	16,201,372
	Non-accredited Investors		N/A	<u>\$</u>	N/A
	Total (for filings under Rule 504 only)		N/A	<u>\$</u>	NA
	Answer also in Appendix, Column 4, if filing under ULOE				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C—Question 1.				
	Type of Offering		Types of Security		Dollar Amount Sold
	Rule 505		N/A	<u>\$</u>	N/A
	Regulation A		N/A	<u>\$</u>	N/A
	Rule 504		N/A	\$	N/A
	Total		N/A	\$	N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees	•••••	🗖	\$	
	Printing and Engraving Costs		🗆	\$	
	Legal Fees		🛛	\$	12,137
	Accounting Fees		🗖	\$	
	Engineering Fees		🗆	\$	
	Sales Commissions (specify finders' fees separately)		🗆	\$	
	Other Expenses (identify)	•••••	🛘	\$	
	Total		🛛	<u>\$</u>	12,137

	C. OFFERING PRICE, NUMBE	ER OF INVESTORS, EXF	ENSES A	ND USE OF PRO	CEEDS	5
4	Enter the difference between the aggregate offering Question 1 and total expenses furnished in response to F "adjusted gross proceeds to the issuer."	\$ 99,987,863				
5	Indicate below the amount of the adjusted gross proceed used for each of the purposes shown. If the amount for a estimate and check the box to the left of the estimate. The adjusted gross proceeds to the issuer set forth in response	any purpose is not known, furnishe total of the payments listed in	h an lust equal	Payments to		
				Officers, Directors & Affiliates		Payments to Others
	Salaries and fees			\$		\$
	Purchase of real estate			\$	_ 🗆	\$
	Purchase, rental or leasing and installation of made	chinery and equipment		<u>\$</u>	_ 🗆	\$
	Construction or leasing of plant buildings and faci	lities		\$	_ 🗆	\$
	Acquisition of other businesses (including the value offering that may be used in exchange for the ass	ue of securities involved in this sets or securities of another issu	er			
	pursuant to a merger		~ _	\$	_ 🗆	\$
	Repayment of indebtedness			\$	_ 🗆	\$
	Working capital			\$	_ 🛛	\$ 99,987,863
	Other (specify):			\$	_ 🗆	\$
				\$		\$
	Column Totals			<u>\$</u>	_ 🗵	\$ 99,987,863
	Total payments Listed (column totals added)			⊠ <u>\$9</u>	9,987	,863
		D. FEDERAL SIGNATU	IRE			
co	is issuer has duly caused this notice to be signed by the unstitutes an undertaking by the issuer to furnish to the U.S the issuer to any non-accredited investor pursuant to para	Securities and Exchange Com	son. If this n mission, upo	otice is filed under Rule on written request of its	505, the staff, the	following signature information furnished
lss	suer (Print or Type)	Signature	·	0	ate .	
Go	ovPlus Fund AI, L.P	(11)	7		Augu	ist .12,2008
Ala	ema of Cianas (Brint os Tyro)	Title of Ciange (Brint or Tune)				

Authorized person of NorCap Advisors, LLC the general partner of NorCap Management, L.P. its general partner

ATTENTION

Carl Y. Baggett

1.	Is any party described in 17 CFR 230 provisions of such rule?	☐ Yes ⊠ No							
		See Appendix, Column 5, for state response.							
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.								
3.	The undersigned issuer hereby undert	akes to furnish to the state administrators, upon written requ	est, information furnished by the issuer to offerees.						
4.	<u> </u>	at the issuer is familiar with the conditions that must be satisf th this notice is filed and understands that the issuer claiming ave been satisfied.	•						
	suer has read this notification and knows tized person.	the contents to be true and has duly caused this notice to be	signed on its behalf by the undersigned duly						
	(Print or Ty us Fund Al, L.P.	Signature	Date August 12,2008						
Name	of Signer (Print or Type)	Title of Signer (Print or Type)							
Carl Y	. Baggett	Authorized person of NorCap Advisors, LL	Authorized person of NorCap Advisors, LLC the general partner of NorCap Management,						

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

L.P. its general partner

				APF	PENDIX					
1	1 2 3 4									
	Intend to non-a investors (Part B -	in State	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and amount purchased in State (Part C – Item 2)					
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
AL										
AK										
AZ										
AR										
CA										
со										
СТ										
DE										
DC										
FL		X	\$100,000,000	1	\$283,367	0	\$0		х	
GA										
н										
ID										
IL										
IN										
IA										
KS		X	\$100,000,000	7	\$9,005,436	0	\$0		х	
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				APF	PENDIX				
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1	2	2	3			4		5	,
	Intend to non-a investors (Part B -	ccredited	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and Amount purchased in State (Part C – Item 2)				
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Accredited Non-Accredited				No
NY									
NC									
ND									
ОН									
ОК									
OR									
PA									
RI									
sc									
SD									
TN								ļ	
TX	<u> </u>	Х	\$100,000,000	23	\$6,729,069	0	\$0		X
UT									
VT	!	Х	\$100,000,000	1	\$183,000	0	\$0		X
VA					<u> </u>				
WA								 	
WV					····	<u> </u>		<u> </u>	
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